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Application Number

Filing Date 07/11/2003

First Named Inventor James C. Hamilton

Group Art Unit

Examiner Name

Attorney Docket Number

				U.S. PATENT DOC	UMENTS	` <u> </u>
Examiner Initials	Cite No.1	U.S. Patent I Number	Kind Code ² (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
1519	1	6,561,445	B2	Yamamoto, et al.	05/13/2003	riquies Appear
1-	2	5,431,094		Savage, Sr.	07/11/1995	
	3	5,329,845		Bichel	07/19/1994	
	4	2,147,022		Formway	02/14/1939	
	5	2,094,880		Formway	10/05/1937	
	6	1,388,026		Conner	08/16/1921	
	7	831,663		Grohens	09/25/1906	
1	8	505,002		Read	09/12/1893	
PIA	9	313,984		Burckhardt	03/17/1885	
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				FORE	IGN PATENT DOCUMEN	TS		
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